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1	PART B - FEE(S) TRANSMITTAL							
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Г	APPLICATION NO.	MILING	FILING DATE FIRST NAMED IN			TOR .	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	10/764,319 01/23/2004				James M. Tedesco BRATING FIBER-COUPLED RAMAN SPECTRON		KOS-14302/03	8187
	fle of invention ID Safety Featur		NEL, SELF-CA	LIBICATING FIRE	ik-Coupled	KAMAN SPECIKUN	WIERS DACFORMS DIV	ALICO IIC

PREV. PAID ISSUIL FILII TOTAL FRE(S) DUE DATE DUE SMALL BATTTY INSUE FEE DUE PUBLICATION FEE DUE APPLN. TYPE 11/30/2006 \$1700 · nonprovisional NO \$1400 \$300 CLASS-SUDCLASS ART UNIT EXAMINEL 356-301000 EVANS, PANNIE L Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Gifford, Krass, Groh, (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) unached. Sprinkle, Anderson (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. & Citkowski, PC Tee Address\* indication (or \*Fee Address\* indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3\_ 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Kaiser Optical Systems Arbor, Michigan Ann Individual 🕅 Curporation or other private group entity 🗖 Government Please check the appropriate assignce entegory or entegories (will not be printed on the patent): 4b. Payment of Fee(s); (Please first reapply any previously paid issue fee shown above) 4a. The following fcc(s) are submitted: Sissue Fee A check is enclosed. Dublication Fee (No small entity discount permitted) B-Payment by credit card. Form PTO 2038 is attached: The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 67-1182 (enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) n. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(1). NOTE: The issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attenties or agent; or the assignce or other party in interest as shown by the records of the United States Patent and Dademark Office. 27, 2006 Nov. Dute **Authorized Signature** John G. 37,424 Posa Registration No. Typed or printed name This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you recipite to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trudenings Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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